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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Declaration for Patent Application

As a named inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated next to my name;

I believe I am the original, first and sole inventor (if only one name is listed) or an original, first and joint inventor (if plural names are listed in the signatory page(s) commencing at page 3 hereof) of the subject matter which is claimed and for which a patent is sought on the invention entitled

DATA PROCESSING SYSTEM FOR MAPPING A COLLABORATIVE REASONING PROCESS

the specification of which (check one)

- is attached hereto.
- was filed on \_\_\_\_\_ as United States Application

Number or PCT International Application No. 09/836,886

and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

<u>Prior Foreign Application(s)</u>			<u>Priority Not Claimed</u>	<u>Certified Copy Filed?</u>
<u>(Number)</u>	<u>(Country)</u>	<u>(Day/Month/Year filed)</u>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.

<u>(Application Number)</u>	<u>(Filing Date)</u>
_____	_____

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known by me to be material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing date)	(Status: patented, pending, abandoned)
(Application Serial No.)	(Filing date)	(Status: patented, pending, abandoned)
(Application Serial No.)	(Filing date)	(Status: patented, pending, abandoned)
(Application Serial No.)	(Filing date)	(Status: patented, pending, abandoned)

As a named inventor, I hereby appoint the attorneys and/or agents associated with  
**Hamilton, Brook, Smith & Reynolds, P.C., Two Militia Drive, Lexington, Massachusetts 02421-4799**  
**Customer No. 21005,**

and \_\_\_\_\_,

to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Please send correspondence to:

[ X ] Customer No.

**21005  
HAMILTON, BROOK, SMITH & REYNOLDS, P.C.  
Two Militia Drive  
Lexington, MA 02421-4799**

or

[ ] Address as follows:

Direct telephone calls to: David J. Thibodeau, Jr. Telephone No.: 781-861-6240

Direct facsimiles to: David J. Thibodeau, Jr. Facsimile No.: 781-861-9540

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

-----  
Full name of sole  
or first inventor Phillip A. Cousins  
Inventor's Signature Phillip Cousins Date July 2, 2001  
Residence 240 Collins Avenue, Apt. 6-D  
Miami Beach, Florida 33139-7181  
Citizenship USA  
Mailing Address Same as above  
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Full name of second joint

inventor, if any Diane L. Downs

Inventor's Signature Diane L. Downs Date July 2, 2001

Residence 240 Collins Avenue, Apt. 6-D

Miami Beach, Florida 33139-7181

Citizenship USA

Mailing Address Same as above

::ODMAMHODMA\iManage;234578;1



STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.9(f) & 1.27(c))-SMALL BUSINESS CONCERN

DOCKET NUMBER: 3031.1000-000

Applicant or Patentee: Phillip A. Cousins and Diane L. Downs  
Application or Patent No.: 09/836,886  
Filed or Issued: April 17, 2001  
Title: DATA PROCESSING SYSTEM FOR MAPPING A COLLABORATIVE REASONING PROCESS

I hereby state that I am

- the owner of the small business concern identified below:  
 an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN Cousins Downs Partnership  
ADDRESS OF SMALL BUSINESS CONCERN 240 Collins Avenue, Apt. 6-D  
Miami Beach, Florida 33139-7181

I hereby state that the above identified small business concern qualifies as a small business concern as defined in 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Trademark Office. Questions related to size standards for a small business concern may be directed to: Small Business Administration, Size Standards Staff, 409 Third Street, SW, Washington, DC 20416 or you may call 202-205-6618.

I hereby state that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

- the specification filed herewith with title as listed above.  
 the application identified above.  
 the patent identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention must file separate statements as to their status as small entities. No rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization having any rights in the invention is listed below:

- no such person, concern, or organization exists.  
 each such person, concern, or organization is listed below.

SofiLogic LLC  
240 Collins Avenue, Apt. 6-D  
Miami Beach, Florida 33139-7181

Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

NAME OF PERSON SIGNING Phillip A. Cousins  
TITLE OF PERSON IF OTHER THAN OWNER Partner  
ADDRESS OF PERSON SIGNING 240 Collins Ave 6-D, Miami Beach FL 33139  
SIGNATURE Phillip A. Cousins DATE July 2, 2001



DOCKET NUMBER: 3031.1000-000

STATEMENT CLAIMING SMALL ENTITY STATUS  
37 CFR 1.9(d) & 1.27(c))-SMALL BUSINESS CONCERN

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 an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN SofiLogic LLC

ADDRESS OF SMALL BUSINESS CONCERN 240 Collins Avenue, Apt. 6-D  
Miami Beach, Florida 33139-7181

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NAME OF PERSON SIGNING Diane L. Downs

TITLE OF PERSON IF OTHER THAN OWNER Founder

ADDRESS OF PERSON SIGNING 240 Collins Ave Miami Beach FL 33139

SIGNATURE Diane L. Downs DATE July 2, 2001